

State of South Dakota

Candidate's or Committee's Report of Receipts and Expenditures RECEIVED

Candidates and candidate committees: File in the office where you filed your nominating petition. JUN 2 9 2004 PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,
500 E Capitol Ave., Pierre, SD 57501-5070 S.D. SEC. OF STATE
See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Candidate or Committee MARY A MISTE
Complete Mailing Address Box 1539 MISSION, SS 57555
Name of Candidate or Committee MARY AMISTE Complete Mailing Address BOX 1539 MISSION, S. 5 57555 Name of Person Making Report Mary Annatte Daytime Phone Number (105) 836-4443 If you are a candidate, what office are you seeking? STATE STNATE
If you are a candidate, what office are you seeking? STATE STNATE
If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.
Type of Report (See pages 4 & 5 of Guideline Book) Post-pRIMH-ny For Reporting Period Ending (See pages 4 & 5 of Guideline Book) Tuky 1, 2004
For Reporting Period Ending (See pages 4 & 5 of Guideline Book) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
The following verification must be completed before submitting report.
VERIFICATION OF PERSON MAKING REPORT
I MARY HWO TE (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.
Date: June 38, 3004 Mary Smittle Candidate Signature or Signature of Committee Treasurer or Chairperson
Revised July 2001
Filed this day of

Name of Candidate or Co		Amistr	Арр
For the reporting period	ending	2021/	
		4009	
This schedule is used for reporting	Schedule A – Dire	ct Contributions	
combine all contributions of \$100	or less from individuals and the	keep a record of all contributors, hi	ut for this you
year from an individual or political	or less from individuals and the sa lines below and on the next page. An all party and all contributions from P of employment (if applicable) of the	me from political parties and enter to	hese sums as unitemize
amount, name, address and place	lines below and on the next page. An all party and all contributions from P of employment (if applicable) of the duplicated if you need more space.	AC's must be entered as a separate	or aggregate during a ca
schedule may be	al party and all contributions from P of employment (if applicable) of the duplicated if you need more space,	or you may attach additional short	tor has their own section
Unitemized Contributions from		• • • • • • • • • • • • • • • • • • •	s or paper.
temized Contributions from Inc	andividuals:		*\$
	lividuals		Ψ
DA KOTA SALA	Residence Address	Place of Employment (Name of Employer)	
	TIERRE, SO	DAtota Sizo	
			\$ <u>500.</u>
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	Individuals:		

	_	Appendix
me of Candidate or Committee:	MARIN AMISTE	<u> </u>
me of Candidate or Committee:	< TULU 1 2004	
r the reporting period ending:	- A Draggeds	
Schedule	B - Fund-Raising Events Proceeds raise money for the candidate and the net proceeds debution results in their aggregate being more than \$100	erived from each event. If a
t on this schedule fund-raising events held to	raise money for the candidate and the net proceeds do bution results in their aggregate being more than \$100	in the calendar year, those
ntributor gives more than \$100 of their contributions must be itemized on Schedule A.		
		Net Proceeds
pe or Name of Event		
otal:		
•		
Sch	edule C - In Kind Contributions	alue exceeds \$100, the name of
Report all non-cash contributions of goods or contributor, residence address and place of em	services and the estimated fair market value. If the value only must be reported.	·····
ontributor, residence address and place of ch	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1
	Name, Residence Address & Place of Employment	Estimated Value
Nature of Non-Cash Contribution	DALOTA 2000	500.00
COMPUTER WEB SITE	prixern	
(DESIGNED)		
Total:		
	Schodule D - Other Income	
	Schedule D - Other Income crest earned or other income which is not a direct cont	ribution.
	Schedule D - Other Income erest earned or other income which is not a direct cont	ribution. Amount
	Schedule D - Other Income crest earned or other income which is not a direct cont	ribution. Amount
Use this schedule to report any refunds, inte	Schedule D - Other Income crest earned or other income which is not a direct cont	ribution. Amount
Use this schedule to report any refunds, inte	Schedule D - Other Income erest earned or other income which is not a direct cont.	ribution. Amount
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Use this schedule to report any refunds, inte	Schedule D - Other Income erest earned or other income which is not a direct cont.	ribution. Amount
Use this schedule to report any refunds, inte	Schedule D - Other Income crest earned or other income which is not a direct cont	ribution. Amount

Name of Candidate or Committee	Appendix B
For the reporting period ending	
Schedule A – Direct Contributions (
Unitemized Contributions from Political Parties:	*\$
Itemized Contributions from Political Parties	
Party Name Address	
	\$
Total of Itemized Contributions from Political Parties:	\$
or remined Contributions from Political Parties:	*\$
Itemized Contributions from Political Action Committees (PAC's) - All contributions	
PAC Name Address	ons from PAC's must be itemized.
	\$
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	\$
otal of Itemized Contributions from Political Action Committees:	\$ *\$
otal of All Direct Contributions (Sum of all lines with an *)	\$

1. 1. 2. 3.	JAMANIA	Amin the	
Name of Candidate or Committee:	MH M	AMIONE	
For the reporting period ending:_	JULY	1, 30 T	

Expenses		Contributions Made to Candidates an	Amount
em	Amount	Name of Candidate or Committee	0
dvertising	2200.00		
Consulting			
ostage			
	200-00		
rinting Lent			
laries	160.00		
elephone	160.00		
ravel	700		
tilities			
ist other expense	List other expense		
ems below	amounts below		
MEALS OR VOTERS)	400.00		
OR VOTERS)			
- <u>,</u>			
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	res: 3000,00		

Name of Candidate or Committee For the reporting period ending:	= JULIU HMISTIE	Арр
This school is	Schedule F - Debts and Obligations	
has been contracted but not bill.	Schedule F - Debts and Obligations late's campaign obligations which are unpaid at the end of the the amount of the obligation.	
as over contracted but not billed, estimat	te the amount of the obligation.	the reporting period. If a s
Owed to:		
- () -	Purpose:	Amount
	-0-	Amount
		
<u></u>		
		
		
		-
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Obligations:		

	200	And the	Appendi
Na	me of Candidate or Committee:///	ARY PTMIOLTE	
Fo	the reporting period ending:	Ly 1, 2014	
	s summary sheet will give a brief outline of all cament the schedules previously completed.	Summary Page spaign finance activity during this reporting period. I	Please transfer all totals
1.	Amount on hand, if any, at the beginning	of the reporting period:	\$
2.	Receipts		
	Schedule A - Direct Contributions	\$_ <i>O</i>	
	Schedule B - Fund-Raising Events	s <i>O</i>	
	Schedule C - In Kind Contributions	\$ 501.00	
	Schedule D - Other Income	\$	
	Total of all Receipts	\$	
3.	Total Monetary Receipts (A+B+D)		\$ <u> </u>
4.	Candidate's Personal Contribution to Own	n Campaign	\$ <u>3000.0</u> 0
5.	Monetary Loans to Candidate or Committee	tee During Reporting Period	\$ <u> </u>
6.	Monetary Loans Repaid During Reporting	g Period	s
7.	Expenditures - Schedule E		\$3000,00
8.	Unpaid Obligations - Schedule F	\$ <i>O</i>	
9.	Amount on hand at the close of this repor This should equal lines $(1+3+4+5) - (6+7)$	0 1	\$

Appendix C

Secretary of State

State Capitol, Ste 204 500 East Capitol Avenue Pierre, South Dakota 57501-5070 sdsos@state.sd.us



Chris Nelson
Secretary of State

Chad Heinrich Deputy

State of South Dakota

Voluntary Statement of Organization for a Political Action or Ballot Question Committee

State law does not require new political action (PAC) or ballot question committees to register with the Secretary of State. Law does however require these committees to file campaign finance reports periodically following the commencement of political activity. This voluntary registration form will give the Secretary of State the information necessary to send your committee the proper reporting forms prior to the deadline for filing.

FULL NAME OF COMMITTEE:	
MAILING ADDRESS:	
COMMITTEE TREASURER:	
TYPE OF COMMITTEE (PAC or E	Ballot Question):ttee, please also indicate the measure which you are
Date:	Signature of person submitting voluntary registration

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www.state.sd.us/sos

Corporations (605) 773-4845 Fax (605) 773-4550